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B1 (Official Form 1)(04/13)	DU	Junioni	ıα	gc I oi	02			
	States Bankı thern District (						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Houston, Pamela	Middle):		Name	of Joint De	ebtor (Spouse	) (Last, First,	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					used by the J maiden, and		in the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-9847	yer I.D. (ITIN)/Comp	plete EIN	Last fo	our digits o	f Soc. Sec. or	· Individual-T	Гахрауег I.D. (ITIN) N	Io./Complete EIN
Street Address of Debtor (No. and Street, City, a 1756 Old Dogwood Jonesboro, GA	and State):	ZIP Code	Street	Address of	f Joint Debtor	(No. and Str	reet, City, and State):	ZIP Code
County of Residence or of the Principal Place of Clayton		30238	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from street P.O. Box 742214 Riverdale, GA	, 	ZIP Code <b>30274</b>	Mailir	g Address	of Joint Debt	or (if differer	nt from street address)	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):								
Type of Debtor  (Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)  Partnership  Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors  Country of debtor's center of main interests:	(Check  ☐ Health Care Busingle Asset Rein 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Broic Clearing Bank ☐ Other  Tax-Exer	al Estate as de 101 (51B)  oker  mpt Entity , if applicable)			the Feer 7 ter 9 ter 11 ter 12 ter 13	Petition is Fi		Recognition eding Recognition roceeding
Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Filing Fee (Check one box	Debtor is a tax-ex under Title 26 of Code (the Internal	the United State	es ).	"incurr	d in 11 U.S.C. § red by an indivional, family, or	dual primarily	for pose."	ness debts.
■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to attach signed application for the court's considerati debtor is unable to pay fee except in installments. I Form 3A.  □ Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration)	individuals only). Must ion certifying that the Rule 1006(b). See Office 7 individuals only). Mu	ial Deb Check if: Deb are Check all St B. Acc	otor is a sr otor is not otor's aggi- less than a applicable lan is bein ceptances	regate nonco \$2,490,925 (e boxes: ng filed with of the plan w	debtor as definess debtor as contingent liquida amount subject this petition.	ned in 11 U.S.C defined in 11 U ated debts (exc to adjustment		ee years thereafter).
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distribution	erty is excluded and	administrative		es paid,		THIS	SPACE IS FOR COURT	USE ONLY
1- 49 99 199 999	1,000- 5,001- 5,000 10,000		5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million	to \$100 to	] 100,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$0 to \$50,001 to \$100,001 to \$500,001	\$1,000,001 \$10,000,001 to \$10 to \$50		] 100,000,001 \$500	\$500,000,001 to \$1 billion				

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Houston, Pamela (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X <u>/s/ Laura Evins</u> September 2, 2015 Signature of Attorney for Debtor(s) (Date) Laura Evins 998464 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Signatures

**B1** (Official Form 1)(04/13)

### Name of Debtor(s):

Houston, Pamela

## Voluntary Petition

(This page must be completed and filed in every case)

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Pamela Houston

Signature of Debtor Pamela Houston

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 2, 2015

Date

### Signature of Attorney\*

#### X /s/ Laura Evins

Signature of Attorney for Debtor(s)

#### Laura Evins 998464

Printed Name of Attorney for Debtor(s)

#### The Semrad Law Firm, L.L.C.

Firm Name

101 Marietta Street NW Suite 3600 Atlanta, GA 30303

Address

### Email: atlcourtdocs@gmail.com

678-668-7160 Fax: 877-601-7063

Telephone Number

### September 2, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

Page 3

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	•
•	

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Northern District of Georgia

		1 (of the first of Georgia		
In re	Pamela Houston		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
¥ • · ·	99(h)(4) as impaired by reason of mental illness or mental making rational decisions with respect to financial
unable, after reasonable effort, to participate in a through the Internet.);	9(h)(4) as physically impaired to the extent of being a credit counseling briefing in person, by telephone, or
☐ Active military duty in a military com	bat zone.
☐ 5. The United States trustee or bankruptcy adrequirement of 11 U.S.C. § 109(h) does not apply in this	ministrator has determined that the credit counseling s district.
I certify under penalty of perjury that the inf	formation provided above is true and correct.
	s/ Pamela Houston amela Houston
Date: September 2, 201	5

В

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B7 (Official Form 7) (04/13)

## **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston	_	Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$24,820.38 2015 YTD: Debtor Gross Employment Income \$32,000.00 2014: Debtor Gross Employment Income \$32,000.00 2013: Debtor Gross Employment Income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$6,000.00 2013: Debtor Tax Return (2012 Tax year)

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AMOUNT	SOURCE
\$2,208.00	2014: Debtor Child Support
\$2,208.00	2013: Debtor Child Support
\$1,140.00	2015 YTD: Debtor Child Support
\$4,200.00	2015 YTD: Debtor Section 8 Stipend
\$9,600.00	2014: Debtor Section 8 Stipend
\$9,600.00	2013: Debtor Section 8 Stipend
\$600.00	2015 YTD: Debtor Rental Income

#### 3. Payments to creditors

#### None

### Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Caf/Carmax Auto Finance Attn: Bankruptcy Po Box 440609 Kennesaw, GA 30160

DATES OF **PAYMENTS** August 10, 2015

AMOUNT PAID

AMOUNT STILL OWING

\$916.00 \$52,898.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT DATES OF PAID OR

NAME AND ADDRESS OF CREDITOR

PAYMENTS/ TRANSFERS

VALUE OF **TRANSFERS** 

AMOUNT STILL OWING

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING**  COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

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None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None 1

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

6820 Polonia Avenue Cleveland, Ohio 44120 DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

October 3, 2014

Fire was started from the home next door and my rental property caught on fire. The right side of the home, the roof and shingles on the roof, water damage. The loss was covered in whole by insurance.

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#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Allen Credit Debt Counseling 20003 387th Ave Wolsey, SD 57384 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 9/2/2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$18.00 Allen Credit Counseling

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None 

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 726 Wynthrope Way Riverdale, Georgia 30274 NAME USED **Pamela Houston**  DATES OF OCCUPANCY May 2012-June 2014

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

BEGINNING AND

NAME (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23 . Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

## 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date September 2, 2015
Signature /s/ Pamela Houston
Pamela Houston
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B6A (Official Form 6A) (12/07)

In re	Pamela Houston	Case No.	
_		,	
		Debtor	

#### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Joint, or Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Secured Claim Deducting any Secured Community Claim or Exemption 48,200.00 JOINT INTEREST 58,713.00 6820 Polonia Avenue Cleveland, Ohio 44120

Cost of Sale 10%: \$4,820.00 Debtor is a secondary owner to the above property, primary owner is her father, Charles Houston.

> Sub-Total > 48,200.00 (Total of this page)

48,200.00 Total >

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B6B (Official Form 6B) (12/07)

In re	Pamela Houston	Case No	
-		Debtor	
		Debtor	

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Х			
2.			Checking Account with Suntrust Bank	-	200.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and		Savings Account with Suntrust Bank	-	100.00
	homestead associations, or credit unions, brokerage houses, or		Navy Federal Credit Union Checking Account	-	0.00
	cooperatives.		Navy Federal Credit Union Savings Account	-	0.00
			Navy Federal Credit Union Business Account	-	0.00
			First Meritt Bank Checking Account	-	0.00
			Cleveland Fire-fighters Credit Union Checking Account	-	5.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.		Household Goods and Furnishings	-	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Wearing Apparel	-	500.00
7.	Furs and jewelry.		Jewelry	-	100.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
			/T	Sub-Total of this page)	al > 1,905.00

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In	re	Pamela Houston			Case No	
				Debtor		
			SCHEDUL	E B - PERSONAL PROP	PERTY	
	,	Type of Property	N O N E	Description and Location of Prope	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
9.	Name in policy a	s in insurance policies.  nsurance company of each  und itemize surrender or  value of each.	Х			
10.	Annuition issuer.	es. Itemize and name each	X			
11.	defined under a as defin Give pa record(s	s in an education IRA as in 26 U.S.C. § 530(b)(1) or qualified State tuition plan led in 26 U.S.C. § 529(b)(1). Inticulars. (File separately the s) of any such interest(s). C. § 521(c).)	X			
12.	Interests other pe	s in IRA, ERISA, Keogh, or ension or profit sharing	401K		-	2,000.00
	plans. Give particulars.	IRA with F	ire-fighters Credit union	-	500.00	
13.	Stock and unit Itemize.	nd interests in incorporated ncorporated businesses.	X			
14.		s in partnerships or joint s. Itemize.	X			
15.	and other	ment and corporate bonds er negotiable and otiable instruments.	X			
16.	Accoun	ts receivable.	X			
17.	property	y, maintenance, support, and y settlements to which the s or may be entitled. Give ars.	X			
18.	Other li-	quidated debts owed to debtor g tax refunds. Give particulars	<b>X</b>			
19.	estates, exercisa debtor o	le or future interests, life and rights or powers able for the benefit of the other than those listed in le A - Real Property.	X			
					Sub-Tot (Total of this page)	al > <b>2,500.00</b>

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

			Debtor ,		
		SCHE	DULE B - PERSONAL PROPE (Continuation Sheet)	CRTY	
	Type of Property	N O N E	Description and Location of Property	JOHR, OI	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		Pontiac Solstice Roadster 2D with eximally 80,000 miles	-	10,550.00
		2012 appr	Range Rover Utility 4D HSE 4WD with coximately 45,000 miles	-	45,875.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	x			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
				Sub-Total (Total of this page)	al > <b>56,425.00</b>

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Pamela Houston	Case No	
_		Debtor	

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > 0.00 | | (Total of this page) | | Total > 60,830.00 | B6C (Official Form 6C) (4/13)

In re	Pamela Houston	Case No.
_		Debtor ,

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)	☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereaft with respect to cases commenced on or after the date of adjustment.)		
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption

Real Property 6820 Polonia Avenue Cleveland, Ohio 44120	O.C.G.A. § 44-13-100(a)(6)	0.00	48,200.00		
Cost of Sale 10%: \$4,820.00 Debtor is a secondary owner to the above property, primary owner is her father, Charles Houston.					
Checking, Savings, or Other Financial Accounts, Certificates of Denosit					

Checking, Savings, or Other Financial Accounts, Certificates of Deposit Checking Account with Suntrust Bank O.C.G.A. § 44-13-100(a)(6) 200.00 200.00							
Checking Account with Suntrust Bank	O.C.G.A. § 44-13-100(a)(b)	200.00	200.00				
Savings Account with Suntrust Bank	O.C.G.A. § 44-13-100(a)(6)	100.00	100.00				
Navy Federal Credit Union Checking Account	O.C.G.A. § 44-13-100(a)(6)	0.00	0.00				
Navy Federal Credit Union Savings Account	O.C.G.A. § 44-13-100(a)(6)	0.00	0.00				
Navy Federal Credit Union Business Account	O.C.G.A. § 44-13-100(a)(6)	0.00	0.00				
First Meritt Bank Checking Account	O.C.G.A. § 44-13-100(a)(6)	0.00	0.00				
Cleveland Fire-fighters Credit Union Checking Account	O.C.G.A. § 44-13-100(a)(6)	5.00	5.00				
Household Goods and Furnishings Household Goods and Furnishings	O.C.G.A. § 44-13-100(a)(4)	1,000.00	1,000.00				
Wearing Apparel Wearing Apparel	O.C.G.A. § 44-13-100(a)(4)	500.00	500.00				
<u>Furs and Jewelry</u> Jewelry	O.C.G.A. § 44-13-100(a)(5)	100.00	100.00				
Interests in IRA, ERISA, Keogh, or Other Pension of 401K	or Profit Sharing Plans O.C.G.A. § 44-13-100(a)(2.1)	2,000.00	2,000.00				
IRA with Fire-fighters Credit union	O.C.G.A. § 44-13-100(a)(2.1)	500.00	500.00				
Automobiles, Trucks, Trailers, and Other Vehicles 2008 Pontiac Solstice Roadster 2D with approximaely 80,000 miles	O.C.G.A. § 44-13-100(a)(3)	0.00	10,550.00				
2012 Range Rover Utility 4D HSE 4WD with approximately 45,000 miles	O.C.G.A. § 44-13-100(a)(3)	0.00	45,875.00				

Total:	4.405.00	109.030.00

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B6D (Official Form 6D) (12/07)

In re	Pamela Houston	Case No.	J.	
-		Debtor		

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	1-QD-D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxx8895  Caf/Carmax Auto Finance Attn: Bankruptcy Po Box 440609 Kennesaw, GA 30160	x	-	Opened 6/01/15 Last Active 7/31/15  PMSI-Vehicle  2012 Range Rover Utility 4D HSE 4WD with approximately 45,000 miles	Ť	A T E D			
			Value \$ 45,875.00	1			52,898.00	7,023.00
Account No. xxxxxxxxxx9612  Navy Federal Cr Union Po Box 3700  Merrifield, VA 22119		-	Opened 4/01/15 Last Active 8/31/15  PMSI-Vehicle  2008 Pontiac Solstice Roadster 2D with approximaely 80,000 miles					
			Value \$ 10,550.00	$\dagger$			10,845.00	295.00
Account No. xxxxx9642  Ocwen Loan Servicing L 12650 Ingenuity Dr Orlando, FL 32826		-	Opened 11/01/04 Last Active 5/05/15 Mortgage 6820 Polonia Avenue Cleveland, Ohio 44120 Cost of Sale 10%: \$4,820.00 Debtor is a secondary owner to the above property, primary owner is her father, Charles Houston.					
	╀	╀	Value \$ 48,200.00	_			58,713.00	10,513.00
Account No.			Value \$					
continuation sheets attached			(Total of t	Subt			122,456.00	17,831.00
Total (Report on Summary of Schedules) 122,456.00 17,831.00					17,831.00			

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B6E (Official Form 6E) (4/13)

In re	Pamela Houston	Case No.	
_		Debtor	

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate eled

schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to $$12,475^*$ per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. $$507(a)(4)$ .
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Pamela Houston	Case No
_		Debtor

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UZLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, S P U T E D AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2014 Account No. xxx-xx-9847 **State Taxes** Georgia Department of Revenue 79.44 **Bankruptcy Unit** 1800 Century Blvd. Suite 17200 Atlanta, GA 30345-3205 979.44 900.00 Account No. xxx-xx-9847 2012, 2014 **Federal Taxes** Internal Revenue Service 0.00 P.O. Box 7346 Philadelphia, PA 19101 8,000.00 8,000.00 Account No. Account No. Account No. Subtotal 79.44 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 8,900.00 Schedule of Creditors Holding Unsecured Priority Claims 8,979.44 Total 79.44 (Report on Summary of Schedules) 8,979.44 8,900.00

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B6F (Official Form 6F) (12/07)

In re	Pamela Houston	Case No.
•		Debtor

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	Č	Ų	Ĺ	T	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	C A H				S F L T E	5	AMOUNT OF CLAIM
Account No. xxxxxxxx6145			Opened 11/01/05 Last Active 4/01/09 Lease	T	A T E D		Ī	
Ally Financial Attn: Bankruptcy Po Box 130424 Roseville, MN 55113		-	Lease					735.00
Account No. xxx-xx-9847	T	┢	medical	$\top$		t	1	
AMCA P.O. Box 1235 Elmsford, NY 10523		-						440.00
Account No. xxxxxxxxxxx4803			Opened 10/01/12 Last Active 8/03/15	<u>                                      </u>		H	+	118.00
American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		-	Credit Card					924.00
Account No. xxx-xx-9847	┢	$\vdash$	cellphone	+		t	+	
AT&T P.O. Box 105262 Atlanta, GA 30348-5262		-						
		L				L		202.78
continuation sheets attached			(Total of t	Subt			)	1,979.78

B6F (Official Form 6F) (12/07) - Cont.

In re	Pamela Houston	Case No
		Debtor

		_		_			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	ISPUTE	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx1171			Opened 12/01/03 Last Active 8/03/15	Т	T		
Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130		-	Credit Card		D		1,089.00
Account No. xxx-xx-9847			collections				
Cas of Tennessee POB 40916 Memphis, TN 38174		-					139.00
Account No. xxxxxxxxxxx6762	╂		Opened 4/01/12 Last Active 7/16/15				100100
Chase Card Po Box 15298 Wilmington, DE 19850		_	Credit Card				2,092.00
Account No. xxxxxxxx3952	t		Opened 5/01/04 Last Active 4/13/05				
Chase-pier1 Chase Card Svcs/Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 19850		-	Credit Card				0.00
Account No. xxx-xx-9847	1		utility bill	+			
City of Cleveland Div of Water 1201 Lakeside Avenue Cleveland, OH 44114		-					Unknown
Sheet no1 of _5 sheets attached to Schedule of	_			Sub	tota	1	3,320.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	3,320.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Pamela Houston	Case No
_		Debtor

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	)	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QUID	15	; ;	AMOUNT OF CLAIM
Account No. xxxxx9513			Opened 5/01/06 Last Active 8/06/15	٦Ÿ	A T E D		ſ	
Comenity Bank/Express Attn: Bankruptcy P.O. Box 182686 Columbus, OH 43218		-	Charge Account		D			297.00
Account No. xxxxx0210	1		Opened 7/01/06 Last Active 7/01/06					
Comenity Bank/New York & Company Attention: Bankruptcy P.O. Box 182125 Columbus, OH 43218		-	Charge Account					
				┸	L		╛	0.00
Account No. xxxxx0391  Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218		-	Opened 6/01/06 Last Active 8/06/15 Charge Account					1,353.00
Account No. xxxx4408			Medical				T	
Cons Rec Sys 2650 Thousand Oaks Memphis, TN 38118		-						646.00
Account No. xxx-xx-9847	T	T	collections	T	T	T	†	
Consolidated Recovery Systems P.O. Box 1719 Memphis, TN 38101		-						1,019.55
Sheet no. 2 of 5 sheets attached to Schedule of	-			Sub	tota	ıl	†	2 24E EE
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	) [	3,315.55

B6F (Official Form 6F) (12/07) - Cont.

In re	Pamela Houston	Case No.
		Debtor

CDEDITODIC NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	T	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXT_XGEXT	U I	I SPUTED	A	AMOUNT OF CLAIM
Account No. xxxxxxx0050			Opened 1/01/11 Last Active 12/27/12	Ť	A T E D			
Firefightrs Community 2300 Saint Clair Ave Ne Cleveland, OH 44114		-	Unsecured		D			2,970.00
Account No. xxx-xx-9847			collections					
Frost-Arnett Company PO Box 198988 Nashville, TN 37219-8988		-						
				L	L		L	149.20
Account No. xxx-xx-9847  Georgia Power 241 Ralph McGill Boulevard Atlanta, GA 30308		-	utility bill					191.88
Account No. xxxxxxxxx6131			Opened 11/01/04 Last Active 7/12/10	Π				
Homeq Servicing Po Box 13716 Sacramento, CA 95853		-	Real Estate Mortgage					Unknown
Account No. xxx-xx-9847			collections	Τ				
Hunter Warfield 4620 Woodland Corp. Blvd Tampa, FL 33614		_						1,560.31
Sheet no. <b>3</b> of <b>5</b> sheets attached to Schedule of				Subt	tota	.1		4 974 20
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)		4,871.39

B6F (Official Form 6F) (12/07) - Cont.

In re	Pamela Houston	Case No
-		Debtor

		1		<del>-</del>		_	1
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	CONT	N N	ı	
MAILING ADDRESS	P	Н	DATE CLAIM WAS INCURRED AND	N	Ļ	S	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM		Q	υ	
AND ACCOUNT NUMBER	CODEBTOR	C	IS SUBJECT TO SETOFF, SO STATE.	G	DZQ	Ė	AMOUNT OF CLAIM
(See instructions above.)	R	Ľ		NGENH	D A	D	
Account No. xxx-xx-9847			medical	] T	DATED		
	1			$\vdash$	D		
Memphis Radiological P.C.							
8010 Stage Hills Blvd		-					
PO Box 341327							
Memphis, TN 38184							
	l						139.00
Account No. xxxxxxxxxxx3664	╁		Opened 10/01/12 Last Active 7/28/15	H	Н		
Account No. AAAAAAAAAAAAA	┨		Credit Card				
Navy Federal Cr Union							
Po Box 3700		l_					
Merrifield, VA 22119							
I Werrineia, VA 22113							
							12,176.00
Account No. xxxxxxxxxx7767			Opened 1/01/13 Last Active 8/31/15				
	1		Unsecured				
Navy Federal Cr Union							
Po Box 3700		-					
Merrifield, VA 22119							
	l						21,230.00
Account No. xxx-xx-9847	╀	-	utility bill	₩	$\vdash$		,
Account No. XXX-XX-9647	┨						
Northeas Ohio Regional sewer							
PO Box 94550		-					
Cleveland, OH 44101							
olovolana, orr 44101							
	l						236.56
	┡	_		$\vdash$	$\vdash$		200.00
Account No. xxx-xx-9847	l		collections				
Povenue Posevery Core	1						
Revenue Recovery Corp PO Box 50250	1			1	1		
	1	[		1	1		
Knoxville, TN 37950	1	1					
							0.4= 00
	L					L	347.00
Sheet no. 4 of 5 sheets attached to Schedule of				Subt	ota	1	24 400 50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	34,128.56

B6F (Official Form 6F) (12/07) - Cont.

In re	Pamela Houston	Case No
		Debtor

	1					. 1 -	
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	_ 6	;   L		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E		S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx8826			Opened 10/01/11 Last Active 8/10/15	T	T		
Syncb/tjx Cos Po Box 965005 Orlando, FL 32896		_	Charge Account		Ē		370.00
Account No. xxxxxxxxxxxxx477	t		Opened 9/01/11 Last Active 1/05/12		$\dagger$	t	
Synchrony Bank / HH Gregg Attention: Bankruptcy Po Box 103104 Roswell, GA 30076	•	-	Charge Account				
							0.00
Account No. xxxxxxxxxxxx8756  Synchrony Bank/Care Credit Attn: bankruptcy Po Box 103104		_	Opened 10/01/12 Last Active 7/12/15 Charge Account				
Roswell, GA 30076							1,404.00
Account No. xxxxxxxxxxxx1415  Synchrony Bank/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076		-	Opened 6/01/04 Last Active 7/26/15 Charge Account				3,378.00
Account No. xxxxxxxxxxxx5624	H		Opened 8/01/06 Last Active 8/14/15			t	
Wfdillards Po Box 14517 Des Moines, IA 50306		-	Charge Account				2,221.00
							_,
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	Sub of this			7,373.00
			(Report on Summary of		To:		54,988.28

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B6G (Official Form 6G) (12/07)

In re	Pamela Houston	Case No
-		Debtor

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Storage xxtra 1572 Highh way 85 Suite 200 Fayetteville, GA 30214 Storage Unit- \$104/monthly

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B6H (Official Form 6H) (12/07)

In re	Pamela Houston	Case No.	
-		,	
		Dehtor	

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Emma Houston 3193 East 132nd Street Cleveland, OH 44120 co-signer on 2012 Range Rover Caf/Carmax Auto Finance Attn: Bankruptcy Po Box 440609 Kennesaw, GA 30160

Fill	in this information to identify your	rase.				1				
	otor 1 Pamela Hou									
	otor 2 use, if filing)				_					
Unit	ed States Bankruptcy Court for th	e: NORTHERN DISTRI	CT OF GEORGIA							
(If kn	ficial Form B 6I		-			☐ An ☐ A s 13		ed filing ent showir as of the f	ng post-petitio following date	: '
	chedule I: Your Inc		anta ara filing tagat	har (Dah	4a= 1	and Dabt	2\ ba	th are an	ally rooman	12/1:
spou	blying correct information. If you use. If you are separated and yo has separate sheet to this form.  Describe Employment  Fill in your employment	ur spouse is not filing w On the top of any addit	rith you, do not incluional pages, write y	ude info	mati	ion about d case nu	your sp mber (if	ouse. If m known).	nore space is Answer ever	needed,
	information.		Debtor 1						iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Emplo	oyed mployed		
	employers.	Occupation	Housing Inspec	ctor						
	Include part-time, seasonal, or self-employed work.	Employer's name	East Point Hou	sing Au	tho	rity				
	Occupation may include student or homemaker, if it applies.	Employer's address	3056 Normand Atlanta, GA 303		rive	·				
		How long employed t	here? 5 years	5						
Par	Give Details About Mo	nthly Income								
Estir	mate monthly income as of the o	•	you have nothing to	report for	any	line, write	\$0 in the	e space. Ir	nclude your no	on-filing
	u or your non-filing spouse have messpace, attach a separate sheet to		ombine the information	on for all	emp	loyers for t	hat pers	on on the	lines below. I	f you need
						For Debt	tor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,1	03.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	3,103	3.00	\$	N/A	

Official Form B 6I Schedule I: Your Income page 1

Debte	or 1	Pamela Houston Case number (if known)		nown)				
	Cot	py line 4 here	4.	For Debtor 1 \$ 3,103	3.00		ebtor 2 or iling spouse N/A	
5.	List	t all payroll deductions:						
J.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ 12' \$ 16: \$ 0	2.00 0.00 1.00 0.00 3.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 620	6.00	\$	N/A	<u>\</u>
7.	Cale	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 2,477	7.00	\$	N/A	<u>i </u>
8.	8a. 8b. 8c. 8d. 8e. 8f.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e. - 8f. 8g. - 8h.+	\$ 190 \$ (	0.00 0.00 0.00 0.00 0.00 0.00 0.00		N/A N/A N/A N/A N/A N/A	
9.	Adu	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ 190	0.00	\$	N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2,667.00	+ \$_		<b>N/A</b> = \$	2,667.00
	other Do r Spe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your der friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a ecify:  dethe amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain blies	depen availab	ble to pay expens	ses listo	ted in <i>Sci</i>	11. +\$	2,667.00 ined
13.	Do y	you expect an increase or decrease within the year after you file this form?	<i>!</i>					ly income
	Yes. Explain: Client will be surrendering her out of state property and no longer will be receiving the Section 8 Stipend as well as the Rental Income from her tenant going forward. The Monies were used to the pay the mortgage as well as the utilities of the home.							

Official Form B 6I Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Pamela Hous	ston			_	eck if this is:	
	otor 2 ouse, if filing)							wing post-petition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the:	NORTH	IERN DISTRICT OF GEOF	RGIA		MM / DD / YYYY	
	e number nown)						A separate filing for 2 maintains a separate	or Debtor 2 because Debtor arate household
Of	fficial Fo	orm B 6J						
S	chedule	J: Your I	Expen	ises				12/13
info	ormation. If manual moder (if know	nore space is ne n). Answer ever	eded, attary question	. If two married people and the shorther sheet to this no.				
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold					
	■ No. Go to □ Yes. <b>Doe</b>	o line 2. es Debtor 2 live	•	ate household?  parate Schedule J.				
2.	Do you have	e dependents?	■ No					
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents'							☐ No ☐ Yes
3.	expenses o	penses include f people other ti d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				☐ Yes
Est exp app	imate your expenses as of a plicable date.	a date after the less paid for with a	our bankrubtc	uptcy filing date unless y	olemental <i>Schedule</i> f you know		the box at the top	of the form and fill in the
	ficial Form 6I	•	hin				Your exp	enses
4.		nd any rent for the		ses for your residence. I or lot.	псшае шѕт топдад	e 4.	\$	300.00
	If not include	ded in line 4:						
		estate taxes				4a.		0.00
	•	rty, homeowner's				4b.	<u> </u>	0.00
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. 4d.	\$ \$	0.00 0.00
5.				our residence, such as ho	me equity loans	5.	· <del></del>	0.00

btor 1	Pamela Houston	Case Hulli	ber (if known)	
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.		0.00
6b.	Water, sewer, garbage collection	6b.	· ·	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		174.00
6d.	Other. Specify:	6d.		0.00
	d and housekeeping supplies	7.	·	300.00
	dcare and children's education costs	8.	·	0.00
	hing, laundry, and dry cleaning	9.		25.00
	sonal care products and services	10.	·	25.00
	ical and dental expenses	11.	\$	5.00
	<b>asportation.</b> Include gas, maintenance, bus or train fare.	12.	<b>Φ</b>	200.00
	not include car payments.	13.		0.00
	ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations	13. 14.	· -	
	•	14.	Φ	0.00
i. Insu	rance. not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	25.00
	Health insurance	15b.	*	0.00
	Vehicle insurance	15c.	·	350.00
	Other insurance. Specify:	15d.	· -	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
	cify: Ad Valorem	16.	\$	50.00
	allment or lease payments:	_	·	00.00
	Car payments for Vehicle 1	17a.	\$	193.00
	Car payments for Vehicle 2	17b.	\$	916.00
17c.	Other. Specify: Storage Unit	17c.	\$	104.00
	Other. Specify:	17d.		0.00
3. You	r payments of alimony, maintenance, and support that you did not report as	10	·	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	· ·	
	er payments you make to support others who do not live with you.	40	\$	0.00
Spe	cry: er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e	19.	/a Imaa maa	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20a. 20b.	·	0.00
	Property, homeowner's, or renter's insurance	20b.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20u. 20e.	·	
	er: Specify:		φ +\$	0.00
. Oth	er. Specily.		+φ	0.00
2. You	r monthly expenses. Add lines 4 through 21.	22.	\$	2,667.00
The	result is your monthly expenses.			
B. Calc	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,667.00
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	2,667.00
23c.	Subtract your monthly expenses from your monthly income.	00	œ.	0.00
	The result is your monthly net income.	23c.	Ф	0.00
l. <b>Do</b> y	The result is your monthly net income.  Tou expect an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your national to the terms of your mortgage?			ise or decrease becau

Explain:

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B8 (Form 8) (12/08)

# **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston		Case No.	
		Debtor(s)	Chapter	7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

e estate (Part Δ mi

property of the estate. Attach additional pages if ne	cessary.)
Property No. 1	
Creditor's Name: Caf/Carmax Auto Finance	Describe Property Securing Debt: 2012 Range Rover Utility 4D HSE 4WD with approximately 45,000 miles
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one):  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain (for example, avoid lien using	g 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	☐ Not claimed as exempt
Property No. 2	
Creditor's Name: Navy Federal Cr Union	Describe Property Securing Debt: 2008 Pontiac Solstice Roadster 2D with approximaely 80,000 miles
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one):  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain (for example, avoid lien using	g 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	☐ Not claimed as exempt

B8 (Form 8) (12/08)			Page 2			
Property No. 3						
Creditor's Name: Ocwen Loan Servicing L		Describe Property Securing Debt: 6820 Polonia Avenue Cleveland, Ohio 44120  Cost of Sale 10%: \$4,820.00 Debtor is a secondary owner to the above property, primary owner is her father, Charles Houston.				
Property will be (check one): ■ Surrendered	☐ Retained					
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S.C	. § 522(f)).			
Claimed as Exempt		☐ Not claimed as exe	empt			
PART B - Personal property subject to und Attach additional pages if necessary.)  Property No. 1	expired leases. (All thre	ee columns of Part B mu	st be completed for each unexpired lease.			
Lessor's Name: Storage xxtra	Describe Leased Pr Storage Unit- \$104		Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ■ YES □ NO			
I declare under penalty of perjury that t personal property subject to an unexpir		intention as to any pr	operty of my estate securing a debt and/or			
Date September 2, 2015	Signature	/s/ Pamela Houston Pamela Houston Debtor				

## **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTORN	EY FOR DE	CBTOR(S)			
C	cursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 ompensation paid to me within one year before the filir e rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, or a	agreed to be paid	to me, for services render	ed or to		
	For legal services, I have agreed to accept (costs in Filing Fee)	•	\$	1,635.00			
	Prior to the filing of this statement I have received.		\$	0.00			
	Balance Due		\$	1,635.00			
2. T	The source of the compensation paid to me was:  Debtor  Other (specify):						
3. T	The source of compensation to be paid to me is:  Debtor  Other (specify):						
4.	✓ I have not agreed to share the above-disclosed comp	pensation with any other person unle	ess they are mem	pers and associates of my	law firm.		
	I have agreed to share the above-disclosed compensations of the agreement, together with a list of the national states.				rm. A		
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
b c.	<ul> <li>Analysis of the debtor's financial situation, and rende</li> <li>Preparation and filing of any petition, schedules, stat</li> <li>Representation of the debtor at the meeting of credite</li> <li>The balance due will be provided for by post</li> </ul>	tement of affairs and plan which ma ors and confirmation hearing, and a	y be required; ny adjourned hea	rings thereof;			
6. B	By agreement with the debtor(s), the above-disclosed fee Motion to Sell Property - \$500.00 Application to Employ Professional/Mot Motion to Incur Debt/Refinance - \$300.0 Motion to Reimpose Stay - \$300.00 Motion to Vacate Dismissal/Reopen Cas Motion to Retain Tax Refund - \$300.00 Amendments to Schedules-\$100.00 plus Stay Violations-\$300.00/hour Adversary Proceeding/ stay violation - H Appellate Practice - Hourly	tion to Approve Compromise - 0 se - \$300.00 plus cost s cost.					
		CERTIFICATION					
	certify that the foregoing is a complete statement of any	y agreement or arrangement for pay	ment to me for re	presentation of the debto	r(s) in		
Dated:	September 2, 2015	/s/ Laura Evins Laura Evins 998464 The Semrad Law Fir 101 Marietta Street N Suite 3600 Atlanta, GA 30303 678-668-7160 Fax: 8	IW 377-601-7063				

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B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston		Case No.	
•		Debtor		
			Chapter	7

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	48,200.00		
B - Personal Property	Yes	4	60,830.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		122,456.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		8,979.44	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		54,988.28	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,667.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,667.00
Total Number of Sheets of ALL Schedu	ıles	21			
	T	otal Assets	109,030.00		
			Total Liabilities	186,423.72	

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B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston		Case No.		
•		Debtor	,		
			Chapter_	7	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	8,979.44
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	8,979.44

### State the following:

Average Income (from Schedule I, Line 12)	2,667.00
Average Expenses (from Schedule J, Line 22)	2,667.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	3,825.88

### State the following:

		_
Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		17,831.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	8,900.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		79.44
4. Total from Schedule F		54,988.28
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		72,898.72

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B6 Declaration (Official Form 6 - Declaration). (12/07)

## **United States Bankruptcy Court** Northern District of Georgia

In re	Pamela Houston			Case No.	
	]	Debtor(s)	Chapter	7	
	DEGLADATION CO.	MOEDN			na
	DECLARATION CO	NCERN	ING DEBTOR'S SC	HEDUL	ES
	DECLARATION UNDER PE	NALTY (	OF PERILIRY BY INDIVI	DHAL DEF	RTOR
	DECEMBER 101 ON DER 12.	IWILI I	TERCKI BI INDIVI	DOTHE DEI	
	I declare under penalty of perjury that sheets, and that they are true and correct to the				es, consisting of23
	sheets, and that they are true and correct to the	oest of my	knowledge, information,	and benen.	
Date	September 2, 2015	ignature	/s/ Pamela Houston		
			Pamela Houston		
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

## **United States Bankruptcy Court** Northern District of Georgia

		Northern District of Georgia		
In re	Pamela Houston		Case No.	
		Debtor(s)	Chapter	7
	VFR	IFICATION OF CREDITOR	MATRIX	
	VER	TICATION OF CREDITOR	14174 1 14174	
e ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.
ate:	September 2, 2015	/s/ Pamela Houston		
	·	Pamela Houston	·	

Signature of Debtor

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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B 201B (Form 201B) (12/09)

# United States Rankruntey Court

	Northern District of Georgia								
In re	Pamela Houston		Case No.						
		Debtor(s)	Chapter	7					
		OF THE BANKRUPT		(8)					
Code.	I (We), the debtor(s), affirm that I (we) have recei		otice, as required by	y § 342(b) of the Bankruptcy					
Pamel	a Houston	X /s/ Pamela Ho	ouston	September 2, 2015					
Printed	l Name(s) of Debtor(s)	Signature of D	ebtor	Date					
Case N	No. (if known)	X							
		Signature of Jo	oint Debtor (if any)	Date					

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Fill	in this information to identify your case:					as directed in this form	and in
Deb	otor 1 Pamela Houston			F	orm 22A-1Supp:		
Dob	otor 2				☐ 1. There is no pres	sumption of abuse	
	ouse, if filing)			-	_	•	
	•	-1-1-1-1-1-0				to determine if a presum made under <i>Chapter 7 N</i>	•
Unit	ted States Bankruptcy Court for the: Northern Dis	strict of Georg	gıa			ficial Form 22A-2).	ieans rest
	e number nown)					t does not apply now be y service but it could ap	
					☐ Check if this is a	an amended filing	
Off	ficial Form 22A - 1					<b>3</b>	
	napter 7 Statement of Your	Curron	t Mon	thly Inc	rome		10/1/
	apter 7 Statement of Tour	Curren	LIVIOI	itiliy ilit	- Cilie		12/14
addi you	ce is needed, attach a separate sheet to this for tional pages, write your name and case number do not have primarily consumer debts or because the competition of Abuse Under § 707(b)(2) (Official Formula:  Calculate Your Current Monthly Income	er (if known). use of qualif orm 22A-1Su	If you be ying milit	elieve that yo ary service,	u are exempted from	a presumption of abu	se because
1.	What is your marital and filing status? Check	one only.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you	. Fill out both	Columns	A and B, line	s 2-11.		
	☐ Married and your spouse is NOT filing with	າ you. You ar	nd your s	pouse are:			
	$\square$ Living in the same household and are no	ot legally ser	parated. F	Fill out both C	olumns A and B, lines	2-11.	
	☐ Living separately or are legally separate penalty of perjury that you and your spous- living apart for reasons that do not include	e are legally s	separated	under nonba	nkruptcy law that appl	ies or that you and your	
c: of in	ill in the average monthly income that you rece ase. 11 U.S.C. § 101(10A). For example, if you are f your monthly income varied during the 6 months, ncome amount more than once. For example, if bo you have nothing to report for any line, write \$0 in	e filing on Sep , add the inco oth spouses o	ptember 1 ome for all	5, the 6-mont 6 months and	th period would be Ma d divide the total by 6.	rch 1 through August 31 Fill in the result. Do not	. If the amount include any
					Column A Debtor 1	Column B Debtor 2 or	
_	Vana anaga maga antana di	m41		mm /k - f -		non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, over all payroll deductions).	rtime, and co	ommissio	ns (before	\$ 3,102.54	\$	
3.	<b>Alimony and maintenance payments.</b> Do not in Column B is filled in.	nclude payme	ents from a	a spouse if	\$ 0.00	\$	
4.	All amounts from any source which are regular of you or your dependents, including child suffrom an unmarried partner, members of your hou and roommates. Include regular contributions fro filled in. Do not include payments you listed on line	upport. Includusehold, your om a spouse of	de regular depender	contributions nts, parents,	\$190.00	\$	
5.	Net income from operating a business, profes	ssion, or farr	m				
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$_	0.00				
	Net monthly income from a business, profession	, or farm \$ _	0.00	Copy here ->	•\$ 0.00	\$	
6.	Net income from rental and other real propert	•	=				
	Gross receipts (before all deductions)	\$		3.34			
	Ordinary and necessary operating expenses	-\$	(	0.00			
	Net monthly income from rental or other real	\$	533	Copy 3.34 here ->	\$ 533.34	\$	
-	property	*			\$ 0.00	\$	
1.	Interest, dividends, and royalties				Ψ		

Official Form 22A-1

Debto	Pamela Houston		Case number	er ( <i>if known</i> )			
			Column A Debtor 1				
8.	Unemployment compensation		\$	0.00	\$		
	Do not enter the amount if you contend that the amoun under the Social Security Act. Instead, list it here:						
	For you \$	0.00					
	For your spouse \$						
	<b>Pension or retirement income.</b> Do not include any arbenefit under the Social Security Act.	mount received that was a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spon Do not include any benefits received under the Social streetived as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total on line 10c.	Security Act or payments manity, or international or					
	10a		\$	0.00	\$		
	10b		\$	0.00	\$		
	10c. Total amounts from separate pages, if any.		+ \$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		3,825.88	+ \$ _		= \$	3,825.88
Part	•••					incom	e
12.	Calculate your current monthly income for the year	·					
	12a. Copy your total current monthly income from line	11	Сор	y line 11 l	<b>here=&gt;</b> 12a.	\$	3,825.88
	Multiply by 12 (the number of months in a year)					X	
	12b. The result is your annual income for this part of the	ne form			12b.	\$	45,910.56
13.	Calculate the median family income that applies to	you. Follow these steps:					
	Fill in the state in which you live.	GA					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size	of household.			13.	\$	41,650.00
1.1	How do the lines compare?						
14.	14a.  Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, check	box 1, <i>There is</i>	no presur	mption of abus	e.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 22A-2.	of page 1, check box 2, The	e presumption o	of abuse is	determined b	y Form 2	22A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information on this	s statement and	d in any at	tachments is t	rue and	correct.
	χ /s/ Pamela Houston			•			
	Pamela Houston Signature of Debtor 1						
	Date September 2, 2015 MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file For	m 22A-2.					
	If you checked line 14b, fill out Form 22A-2 and fil	le it with this form.					

Official Form 22A-1

	<u> </u>
Fill in this information to identify your case:	Check one box only as directed in lines 40 or 42:
Debtor 1 Pamela Houston	
Debtor 2 (Spouse, if filing)	According to the calculations required by this Statement:
United States Bankruptcy Court for the: Northern District of Georgia	■ 1. There is no presumption of abuse.
Case number (if known)	☐ 2. There is a presumption of abuse.
Official Form 22A - 2	☐ Check if this is an amended filing
Chapter 7 Means Test Calculation	12/14
To fill out this form, you will need your completed copy of Chapter 7 States	ment of Your Current Monthly income (Official Form 22A-1).
Be as complete and accurate as possible. If two married people are filing to space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).  Part 1: Calculate Your Adjusted Income	
Copy your total current monthly income. Copy line 11	from Official Form 22A-1 here=> 1. \$ 3,825.88
2. Did you fill out Column B in Part 1 of Form 22A-1?	
■ No. Fill in \$0 on line 3d.	
☐ Yes. Is your spouse Filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 on line 3d.	
<ol> <li>Adjust your current monthly income by subtracting any part of your shousehold expenses of you or your dependents. Follow these steps:</li> <li>No. Fill in \$0 on line 3d.</li> </ol>	spouse's income not used to pay for the
☐ Yes. Fill in the information below:	
State each purpose for which the income was used	Fill in the amount you are subtracting from
For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	your spouse's income
3a	
3b	\$
3c	_ \$
3d. <b>Total.</b> Add lines 3a, 3b, and 3c	\$
20. 12.0. Add 11.00 00, 00, 010 00	Copy total here=>3d \$ 0.00

Official Form 22A-2

Adjust your current monthly income. Subtract line 3d from line 1.

3,825.88

Debtor 1	Pamela Houston	Case number (if known)					
Part 2:	Calculate Your Deductions from Your Income						
to ans instru Deduc	swer the questions in lines 6-15. To find the IRS state actions for this form. This information may also be at the expense amounts set out in lines 6-15 regardless	s of your actual expense. In later parts of the form, you will use some					
		s. Do not deduct any amounts that you subtracted fro your spouse's that you subtracted from in income in lines 5 and 6 of form 22A-1.					
•	r expenses differ from month to month, enter the avera						
When	ever this part of the from refers to <i>you</i> , it means both y	you and your spouse if Column B of Form 22A-1 is filled in.					
5. <b>1</b>	The number of people used in determining your dec	ductions from income					
p	Fill in the number of people who could be claimed as explus the number of any additional dependents whom you he number of people in your household.						
Natio	nal Standards You must use the IRS National	al Standards to answer the questions in lines 6-7.					
S	6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.  \$ 585.00						
tl p	he dollar amount for out-of-pocket health care. The nur	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and e a higher IRS allowance for health care costs. If your actual expenses are ional amount on line 22.					
Peopl	le who are under 65 years of age						
7	a. Out-of-pocket health care allowance per person	\$60					
7	b. Number of people who are under 65	X1					
7	c. Subtotal. Multiply line 7a by line 7b.	\$ 60.00 Copy line 7c here=> \$ 60.00					
Peopl	le who are 65 years of age or older						
7	d. Out-of-pocket health care allowance per person	\$144_					
7	e. Number of people who are 65 or older	X0					
7	f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$ Copy line 7f here=> \$ 0.00					
7	g. T <b>otal.</b> Add line 7c and line 7f	\$\$ Copy total here=> 7g. \$\$					

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**Pamela Houston Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, 477.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 823.00 9a. \$ listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Ocwen Loan Servicing L 415.00 Copy line 415.00 415.00 9b. Total average monthly payment 9b here=> 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage line 9c 408.00 408.00 or rent expense). If this amount is less than \$0, enter \$0. 9c. \$ here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 0.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Debtor 1	Pamela Houston		Cas	e number ( <i>if kno</i>	own)			
	13. <b>Vehicle ownership or lease expense:</b> Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments							
Vel	Describe Vehicle 1:							
13a.	Ownership or leasing costs using IRS Local Standard		13a.	\$	0.00			
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.							
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.							
	Name of each creditor for Vehicle 1	Average mont	thly					
		\$	Copy 13b					
			here =>	-\$	0.00	_		
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0	, enter \$0.	13c.	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00	
Vel	nicle 2 Describe Vehicle 2:					_		
13d.	Ownership or leasing costs using IRS Local Standard		13d.	\$	0.00			
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	. Do not include	costs for					
	Name of each creditor for Vehicle 2	Average mont	thly					
		\$	Copy 13e		0.00			
			here =>	-\$	0.00	<b>7.</b>		
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0	, enter \$0.				Copy net Vehicle 2 expense		
			13f.	\$	0.00	here => \$	0.00	
14.	<b>Public transportation expense:</b> If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you			al Standards	s, fill in the	Public \$	0.00	
15.	<b>Additional public transportation expense:</b> If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe					0.00	

Debtor 1 Pamela Houston Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soo from your pay for these tax	mount that you will actually owe for federal, state and local taxes, such as income taxes, sial security taxes, and Medicare taxes. You may include the monthly amount withheld es. However, if you expect to receive a tax refund, you must divide the expected refund by er from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate,	sales, or use taxes.	\$	341.46
17.	Involuntary deductions: 7 contributions, union dues, a	The total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	at are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	121.42
18.	filing together, include payr	monthly premiums that you pay for your own term life insurance. If two married people are ments that you make for your spouse's term life insurance. Do not include premiums for endents, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or has spousal or child support payments.		
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	as a condition for your job,		<b>c</b>	0.00
	for your physically or menta	ally challenged dependent child if no public education is available for similar services.	\$ <u> </u>	0.00
21.	<b>Childcare:</b> The total month preschool.	nly amount that you pay for childcare, such as babysitting, daycare, nursery, and		2.22
	Do not include payments for	or any elementary or secondary school education.	\$	0.00
22.	that is required for the heal	penses, excluding insurance costs: The monthly amount that you pay for health care th and welfare of you or your dependents and that is not reimbursed by insurance or paid it. Include only the amount that is more than the total entered in line 7.		0.00
	Payments for health insura	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	services for you and your d business cell phone service	elephone services: The total monthly amount that you pay for telecommunication lependents, such as pagers, call waiting, caller identification, special long distance, or e, to the extent necessary for your health and welfare or that of your dependents or for the s not reimbursed by your employer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment eported on line 5 of Official Form 22A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	1,992.88

Debtor 1 Pamela Houston Case number (if known)

Add	litional Expense Deductions These are additional de	duction	s allowed by th	ne Means Test.		
	Note: Do not include an	y exper	nse allowances	s listed in lines 6-24.		
25.	Health insurance, disability insurance, and health sar insurance, disability insurance, and health savings accourance dependents.				or	
	Health insurance	\$	162.57			
	Disability insurance	\$	0.00			
	Health savings account	+\$	0.00			
				7		
	Total	\$	162.57	Copy total here=>	\$	162.57
	Do you actually spend this total amount?			_		
	□ No. How much do you actually spend?					
	Yes	\$				
26.	Continued contributions to the care of household or continue to pay for the reasonable and necessary care a of your household or member of your immediate family w	nd supp	oort of an elder	rly, chronically ill, or disabled member	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably ne safety of you and your family under the Family Violence					
	By law, the court must keep the nature of these expense	s confid	lential.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy cost allowance on line 8.	ts are in	cluded in your	r non-mortgage housing and utilities		
	If you believe that you have home energy costs that are non-mortgage housing and utilities allowance, then fill in					
	You must give your case trustee documentation of your a amount claimed is reasonable and necessary.	actual e	xpenses, and	you must show that the additional	\$	0.00
29.	Education expenses for dependent children who are \$156.25* per child) that you pay for your dependent child public elementary or secondary school.					
	You must give your case trustee documentation of your a claimed is reasonable and necessary and not already ac					
	* Subject to adjustment on 4/01/16, and every 3 years af	ter that	for cases begi	un on or after the date of adjustment.	\$	0.00
30.	<b>Additional food and clothing expense.</b> The monthly ar higher than the combined food and clothing allowances in than 5% of the food and clothing allowances in the IRS N	n the IR	S National Sta			
	To find a chart showing the maximum additional allowand instructions for this form. This chart may also be available					
	You must show that the additional amount claimed is rea	asonable	e and necessa	ıry.	\$	0.00
31.	<b>Continuing charitable contributions.</b> The amount that instruments to a religious or charitable organization. 26 U				\$	0.00
32.	Add all of the additional expense deductions Add lines 25 through 31.				\$	162.57

Debtor 1 Pamela Houston Case number (if known)

Deductions for Debt Pa	ayment							
		n property that you own, ind	cluding home mo	ortgages, vehicle				
loans, and other secured debt, fill in lines 33a through 33g.  To calculate the total average monthly payment, add all amounts that are contractually due to each secured								
		nkruptcy. Then divide by 60.	contractually due t	o each secured				
Mortgages on y	our home:					verage monthly ayment		
33a. Copy line 9b her	e				.=> \$	415.00		
	irst two vehicles							
33b. Copy line 13b he	re				=> \$	0.00		
33c. Copy line 13e he	re				=> \$	0.00		
Name of each creditor for	other secured debt	Identify property that secures	the debt	Does paymer include taxes insurance?				
				□ No				
33dNONE-				☐ Yes	\$			
				□ No	_			
33e				U Yes	\$			
				□ No				
33f.				☐ Yes	+\$			
	_							
				4 524 00	Copy total	4 504 00		
33g. Total average mo	nthly payment. Add lines	33a through 33f	\$ <u>-</u>	1,524.00	here=>	\$ 1,524.00		
		cured by your primary reside ort or the support of your d			<u> </u>			
■ No. Go to line	35.							
listed in lir		by to a creditor, in addition to to n of your property (called the operation below.						
Name of the creditor	Ide	entify property that secures the	debt	Total cure amount		Monthly cure amount		
-NONE-				\$	÷ 60 = \$			
					Сору			
			Total \$	0.00	total here=>	\$ 0.00		
		priority tax, child support, o ankruptcy case? 11 U.S.C. §						
☐ No. Go to line	36.							
	otal amount of all of thes	se priority claims. Do not incluose you listed in line 19.	de current or					
	ount of all past-due priori	•	\$ <u>_</u>	8,900.00	÷ 60 =	\$148.33		

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**Pamela Houston** Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. ■ No. Go to line 37. ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). Copy total Average monthly administrative expense if you were filing under Chapter 13 here=> 1,672.33 37. Add all of the deductions for debt payment. Add lines 33g through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 1,992.88 expense allowances Copy line 32, All of the additional expense deductions 162.57 Copy line 37, All of the deductions for debt payment +\$ 1,672.33 3,827.78 3,827.78 Total deductions Copy total here=> Part 3: Determine Whether There is a Presumption of Abuse 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 3,825.88 39b. Copy line 38, Total deductions 3,827.78 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy line -1.90 -1.90 Subtract line 39b from line 39a 39c here=>\$ x 60 For the next 60 months (5 years) Copy line -114.00 -114.00 39d. **Total.** Multiply line 39c by 60 39d. 39d here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$7,475\*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$12,475\*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$7,475\*, but not more than \$12,475\*. Go to line 41. \*Subject to adjustment on 4/01/16, and every 3 years after that for cases filed on or after the date of adjustment.

Case number (if known)

41.	41a.	<b>Fill in the amount of your total nonpriority unsecured debt.</b> If you filled ou <i>A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules</i> (Official form 6), you may refer to line 5 on that form.	a. \$ 
	41h	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(1	Copy
		Multiply line 41a by 0.25.	)   \$\phi
25%	% of y	ne whether the income you have left over after subtracting all allowed ded our unsecured, nonpriority debt. e box that applies:	uctions is enough to pay
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Thei</i> Part 5.	re is no presumption of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, checumption of abuse. You may fill out Part 4 if you claim special circumstances. The	
Part 4:	Giv	re Details About Special Circumstances	
43. <b>Do yo</b> reaso	u hav nable	ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B).	nts of current monthly income for which there is no
■ No	o. Go	to Part 5.	
☐ Ye		in the following information. All figures should reflect your average monthly expch item. You may include expenses you listed in line 25.	pense or income adjustment for
	ne	u must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation ciustments.	
	G		verage monthly expense r income adjustment
			\$
			\$
			\$
	-		\$
	_		
Part 5:		In Below  gning here, I declare under penalty of perjury that the information on this statem	nent and in any attachments is true and correct
_	-		ient and in any attachments is true and correct.
2		Pamela Houston Imela Houston	
	•	gnature of Debtor 1	
Dat		#ptember 2, 2015 M / DD / YYYY	

Pamela Houston

Debtor 1 Pamela Houston

Case number (if known)

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 03/01/2015 to 08/31/2015.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: East Point Housing Authority

Income by Month:

6 Months Ago:	03/2015	\$3,102.54
5 Months Ago:	04/2015	\$3,102.54
4 Months Ago:	05/2015	\$3,102.54
3 Months Ago:	06/2015	\$3,102.54
2 Months Ago:	07/2015	\$3,102.54
Last Month:	08/2015	\$3,102.54
	Average per month:	\$3,102.54

### Line 4 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

6 Months Ago:	03/2015	\$190.00
5 Months Ago:	04/2015	\$190.00
4 Months Ago:	05/2015	\$190.00
3 Months Ago:	06/2015	\$190.00
2 Months Ago:	07/2015	\$190.00
Last Month:	08/2015	\$190.00
	Average per month:	\$190.00

### Line 6 - Rent and other real property income

Source of Income: **Rental Income** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	03/2015	\$100.00	\$0.00	\$100.00
5 Months Ago:	04/2015	\$100.00	\$0.00	\$100.00
4 Months Ago:	05/2015	\$100.00	\$0.00	\$100.00
3 Months Ago:	06/2015	\$100.00	\$0.00	\$100.00
2 Months Ago:	07/2015	\$0.00	\$0.00	\$0.00
Last Month:	08/2015	\$0.00	\$0.00	\$0.00
	Average per month:	\$66.67	\$0.00	
			Average Monthly NET Income:	\$66.67

Debtor 1 Pamela H	ouston		Case number (if known)	
Line 6 - Rent and o Source of Income: S Income/Expense/Ne	<u>-</u>			
•	Date	Income	Expense	Net
6 Months Ago:	03/2015	\$700.00	\$0.00	\$700.00
5 Months Ago:	04/2015	\$700.00	\$0.00	\$700.00
4 Months Ago:	05/2015	\$700.00	\$0.00	\$700.00
3 Months Ago:	06/2015	\$700.00	\$0.00	\$700.00
2 Months Ago:	07/2015	\$0.00	\$0.00	\$0.00
Last Month:	08/2015	\$0.00	\$0.00	\$0.00
	Average per month:	\$466.67	\$0.00	
			Average Monthly NET Income:	\$466.67

Ally Financial Attn: Bankruptcy Po Box 130424 Roseville, MN 55113

AMCA P.O. Box 1235 Elmsford, NY 10523

American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355

AT&T P.O. Box 105262 Atlanta, GA 30348-5262

Caf/Carmax Auto Finance Attn: Bankruptcy Po Box 440609 Kennesaw, GA 30160

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cas of Tennessee POB 40916 Memphis, TN 38174

Chase Card Po Box 15298 Wilmington, DE 19850 Chase-pier1 Chase Card Svcs/Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 19850

City of Cleveland Div of Water 1201 Lakeside Avenue Cleveland, OH 44114

Comenity Bank/Express Attn: Bankruptcy P.O. Box 182686 Columbus, OH 43218

Comenity Bank/New York & Company Attention: Bankruptcy P.O. Box 182125 Columbus, OH 43218

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Cons Rec Sys 2650 Thousand Oaks Memphis, TN 38118

Consolidated Recovery Systems P.O. Box 1719 Memphis, TN 38101

Department of Justice, Tax Div Civil Trial Section, Southern PO Box 14198; Ben Franklin Sta Washington, DC 20044

Emma Houston 3193 East 132nd Street Cleveland, OH 44120 Firefightrs Community 2300 Saint Clair Ave Ne Cleveland, OH 44114

Frost-Arnett Company PO Box 198988 Nashville, TN 37219-8988

Georgia Department of Revenue Bankruptcy Unit 1800 Century Blvd. Suite 17200 Atlanta, GA 30345-3205

Georgia Power 241 Ralph McGill Boulevard Atlanta, GA 30308

Homeq Servicing Po Box 13716 Sacramento, CA 95853

Hunter Warfield 4620 Woodland Corp. Blvd Tampa, FL 33614

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

Internal Revenue Service 401 W Peachtree St. NW Stop 334-D Atlanta, GA 30308

Memphis Radiological P.C. 8010 Stage Hills Blvd PO Box 341327 Memphis, TN 38184

Navy Federal Cr Union Po Box 3700 Merrifield, VA 22119

Northeas Ohio Regional sewer PO Box 94550 Cleveland, OH 44101

Ocwen Loan Servicing L 12650 Ingenuity Dr Orlando, FL 32826

Office of the Attorney General 40 Capitol Square, SW Atlanta, GA 30334

Revenue Recovery Corp PO Box 50250 Knoxville, TN 37950

Special Assistant U.S. Attorne 401 W. Peachtree Street, NW STOP 1000-D, Suite 600 Atlanta, GA 30308

Storage xxtra 1572 Highh way 85 Suite 200 Fayetteville, GA 30214

Syncb/tjx Cos Po Box 965005 Orlando, FL 32896

Synchrony Bank / HH Gregg Attention: Bankruptcy Po Box 103104 Roswell, GA 30076 Synchrony Bank/Care Credit Attn: bankruptcy Po Box 103104 Roswell, GA 30076

Synchrony Bank/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076

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Wfdillards Po Box 14517 Des Moines, IA 50306